

Application No. 10/692,891

11/10/05

(Date of Deposit)

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Roberta A. Cooper

(Printed Name)

1450, Alexandria, VA 22313-1450.

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(Express Mail Label Number)

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant:

Helmut Laig-Hoerstebrock

Eberhard Meissner Wilfried Tautenhahn

Title:

**METHOD FOR** 

DETERMINING THE WEAR TO A STORAGE BATTERY, AND A MONITORING DEVICE

Appl. No.:

10/692,891

Filing Date:

10/24/2003

Examiner:

Aaron C. Piggush

Art Unit:

2838

Confirmation No.:

8708

Atty. Dkt. No.:

054821-0873

## AMENDMENT TRANSMITTAL

Mail Stop AMENDMENT Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an amendment in the above-identified application.

- [X] Reply and Amendment (11 pages).
- [X] Formal Drawing (Sheet 1; Fig. 1) (Replacement Drawing).

MILW\_1915165

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[X] The fee required for additional claims is calculated below:

|                      |   | Claims         |       | <b>.</b>     |        | Extra        |     |          |     | A 1 1° 1   |  |
|----------------------|---|----------------|-------|--------------|--------|--------------|-----|----------|-----|------------|--|
|                      | ·<br>·  | As             |       | Previously   |        | Claims       |     | D -4-    | •   | Additional |  |
|                      |   | Amended        |       | Paid For     |        | Present      |     | Rate     |     | Claims Fee |  |
|                      | Total Claims:   | 24             | -     | 25           | =      | 0 .          | X   | \$50.00  | =   | \$0.00     |  |
|                      | Independent<br>Claims:  | 3              | -     | 3            | =      | 0            | x   | \$200.00 | =   | \$0.00     |  |
|                      | First p   | oresentation ( | of ar | y Multiple I | Depen  | dent Claims: | +   | \$360.00 | = - | \$0.00     |  |
|                      |   |                |       |              |        | CLAIMS       | FE  | E TOTAL  | = - | \$0.00     |  |
| [                    | [ ] Applicant hereby petitions for an extension of time under 37 C.F.R. §1.136(a) for the total number of months checked below: |                |       |              |        |              |     |          |     |            |  |
| [                    | Extension for response filed within the first month: \$120.00   |                |       |              |        |              |     |          |     | \$0.00     |  |
| [                    | Extension for response filed within the second month: \$450.00  |                |       |              |        |              |     |          |     | \$0.00     |  |
| [                    | [ ] Extension for response filed within the third month: \$1,020.00   |                |       |              |        |              |     |          | •   | \$0.00     |  |
| [                    | [ ] Extension for response filed within the fourth month: \$1,590.00  |                |       |              |        |              |     |          |     | \$0.00     |  |
| [                    | [ ] Extension for response filed within the fifth month: \$2,160.00   |                |       |              |        |              |     |          | •   | \$0.00     |  |
| EXTENSION FEE TOTAL: |   |                |       |              |        |              |     |          | •   | \$0.00     |  |
| [                    | ] Statutory Di  | sclaimer Fee   | und   | ler 37 C.F.R | . 1.20 | (d):         |     | \$130.00 | •   | \$0.00     |  |
| _                    | CLAIMS, EXTENSION AND DISCLAIMER FEI  |                |       |              |        |              |     | TOTAL:   |     | \$0.00     |  |
| [                    | Small Entity Fees Apply (subtract ½ of above):  |                |       |              |        |              |     |          |     | \$0.00     |  |
|                      |   |                |       |              |        | •            | TOT | AL FEE:  |     | \$0.00     |  |

[X] The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 06-1447. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 06-1447. If any extensions of time are needed for timely acceptance of papers submitted herewith, applicant hereby petitions for such extension under 37 C.F.R. §1.136 and authorizes payment of any such extensions fees to Deposit Account No. 06-1447.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

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Kristy J. Downing

Attorney for Applicant

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